

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | 535 | 09-06-01 |
| RESPONSE FORMALITY REVIEW | | PSI | 10-01-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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8/21/03
5/16/03
10/1/03
11/1/03